

ANNUAL REPORT

OF THE

ROYAL EDINBURGH ASYLUM



FOR

THE INSANE.

FOR THE YEAR 1855.

EDINBURGH:

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ROYAL EDINBURGH ASYLM

FOR
THE INSANE.

Patroness—The Queen.

OFFICE-BEARERS FOR 1856.

GOVERNOR.

THE DUKE OF BUCCLEUCH AND QUEENSBERRY.

DEPUTY-GOVERNORS.

Sir GEORGE CLERK, Bart.
Sir JOHN S. FORBES, Bart.
Lord MURRAY.

GEORGE FORBES, Esq.
JAMES MACKENZIE, Esq.

EXTRAORDINARY MANAGERS.

Lord Provost of the city of Edinburgh.
Lord President of the Court of Session.
Lord Justice-Clerk of the Court of Justiciary.
Lord Advocate of Scotland.
Solicitor-General of Scotland.
Dean of the Faculty of Advocates.
Deputy-Keeper of Her Majesty's Signet.
Members of Parliament for the City.
Member of Parliament for the County.

Sheriff of the County of Edinburgh.
Principal of the University of Edinburgh.
President of the Royal College of Physicians.
President of the Royal College of Surgeons.
Senior Minister of Edinburgh.
Master of the Merchant Company.
Preses of the Society of Solicitors.
Dean of Guild of the City.
Deacon Convener of the Trades.

ORDINARY MANAGERS.

The Lord Provost, (*ex-off.*)
G. A. M'Laren, Esq.
James Morgan, Esq.
John A. Mackay, Esq.
H. M. Inglis, Esq.
Alexander Stevenson, Esq.
Alex. Pringle, Esq.
Henry Craigie, Esq.

John Learmonth, Esq.
Dr Andrew.
Rev. Dr George Smith.
James Blackadder, Esq.
L. A. Wallace, Esq.
Robt. Johnstone, Esq.
James Taylor, Esq.

MEDICAL BOARD.

President of the Royal College of Physicians.
President of the Royal College of Surgeons.

Dr William Pulteney Alison.
James Syme, Esq.
Dr David Maclagan.

Dr GILLESPIE, Consulting Physician. Dr SKAE, Resident Physician.

Dr HOWDEN, and Dr M'CULLOUGH, Medical Assistants.

Miss Macdougall, Matron. ~~House Superintendent.~~

Rev. R. Lorimer, Chaplain.

John Scott, W.S., Secretary and Treasurer.

REPORT
OF
THE ORDINARY MANAGERS
OF THE
ROYAL EDINBURGH ASYLUM FOR THE INSANE.

*Presented to the Annual General Meeting of the Corporation, held
on Monday, the 25th day of February, 1856.*

THE Ordinary Managers of the Asylum have now to present their Annual Report, in conformity with the Act of Incorporation.

The average number of Patients in all Departments of the Institution, during the year 1855, was 546·21, being five less than during the preceding year.

The amount of ordinary receipts by the Treasurer during the year was,..... £16,659 5 5

And of the Ordinary Expenditure,..... 16,301 13 10

Thus leaving a surplus of,..... £357 11 7

As directed by last General Meeting, when the Board of the Pauper Patients for the two quarters subsequent to 1st April, 1855, was continued at the former rates of £22 and £25, the subject of Board was again considered, after the contracts for the second half of last year had been taken, and the Managers then saw no reason to make any change in the rates, which have therefore been continued to the present time.

This subject has again occupied the serious attention of the Managers; and although the expenses of the Establishment during the

past year have considerably exceeded their anticipations, and the Contracts for the present half-year are upon the whole higher than at any preceding time, they are very reluctant, unless absolutely compelled, to propose any addition to the present rates. They have therefore, though with considerable hesitation, resolved to recommend that these should be continued as at present, for the two quarters from 1st April next, subject, as formerly, to any alteration for the two subsequent quarters, which may appear necessary after the Contracts for the second half of the year have been adjusted.

Soon after last Annual Meeting, the Managers proceeded, under the advice of Mr Bryce, their Architect, to take estimates for those portions of their buildings, the erection of which was then in contemplation; and in reporting as to this matter, they cannot avoid expressing their deep regret at not having been able to undertake the entire completion of the original design of the house, including a new Laundry Establishment, which had been rendered almost a matter of absolute necessity, ever since the last extension of the Asylum. After maturely considering the whole subject, in connection with the available means at their disposal, the Managers, feeling it to be their duty to apply these means towards such objects as appeared to be of the most urgent and indispensable character, finally resolved to content themselves at present, with erecting the centre octagon and southmost portion of the west wing, together with the separate building to the west, for refractory Patients. It is expected that there will thus be obtained accommodation for nearly two hundred additional Patients. The estimates for these buildings, which it will be the duty of the Managers to forward to completion at the earliest period possible, amount to £12,273 10s. 9d., to which have to be added the cost of boundary walls, the painting, papering, and furnishing of the new buildings, as well as architects and surveyors' fees, and other extras. The total amount of all these items being necessarily uncertain, the Managers did not consider it prudent, until that shall be ascertained, to undertake further outlay of the same nature. It is impossible, however, for them to shut their eyes to the fact, that the Institution cannot long remain in the state in which it will be on the completion of the works now in progress; and they believe it will be a matter of absolute necessity, at no dis-

tant time, to make provision in some way or other for the entire completion of the buildings, including the new Laundry, the deficiency in that department being even at present a very serious evil.

The time having arrived for placing the debt of the Asylum upon the footing provided for in the recent Act of Parliament, the Managers, at the term of Whitsunday last, put in exercise their powers under that Act of borrowing a sum of £23,828 0s. 11d., which, along with a further sum of £4200, subsequently borrowed, has been applied primarily in paying off the former debt, which had been contracted on promissory-notes by the Treasurer under authority of the Managers, the remainder being intended to defray the expense of the new buildings now in progress. At Whitsunday next, it will also be incumbent on the Managers to lay aside the first annual instalment of the Sinking Fund for the liquidation of so much of the total debt of £30,000, as provided by the Act ; and by that time also they hope to be able to form some judgment as to the probable free surplus of funds which will be at their disposal after the completion of the works now on hand, and to make arrangements as to the future, which, in present circumstances, they have not the means of doing.

It will be seen by the Report and Accounts, now presented by the Committee appointed to administer the Charitable Department of the Asylum, that the fund under their charge is in a very flourishing condition. For this reason, and as there must necessarily be a heavy strain upon the annual resources of the Institution, so long as a large portion of its capital remains unproductive, as at present, the Managers have resolved, on this occasion, to discontinue their usual contribution to the Charity Fund of one-tenth of the Board of Patients paying £50 and upwards ; and it is not improbable that, for the same reasons, they may consider it to be their duty to suspend these contributions for some years to come.

The surplus of Income brought out in the beginning of this Report, is upon the supposition of nothing being paid at this time to the Charity Fund ; and had the same contribution been continued, as in former years, the Free Income must have been more than exhausted.

The arrangements for constant superintendence, by means of a

Weekly Visiting Committee of Managers, serving by rotation, which have been in operation for the last three years, are still found to be of the greatest advantage, and may now be considered as forming the very basis of the system of management of the Institution.

The Managers have only, in conclusion, to refer to the Reports herewith presented by the Resident Physician and Chaplain for details belonging to these departments.

ADAM MESSER.

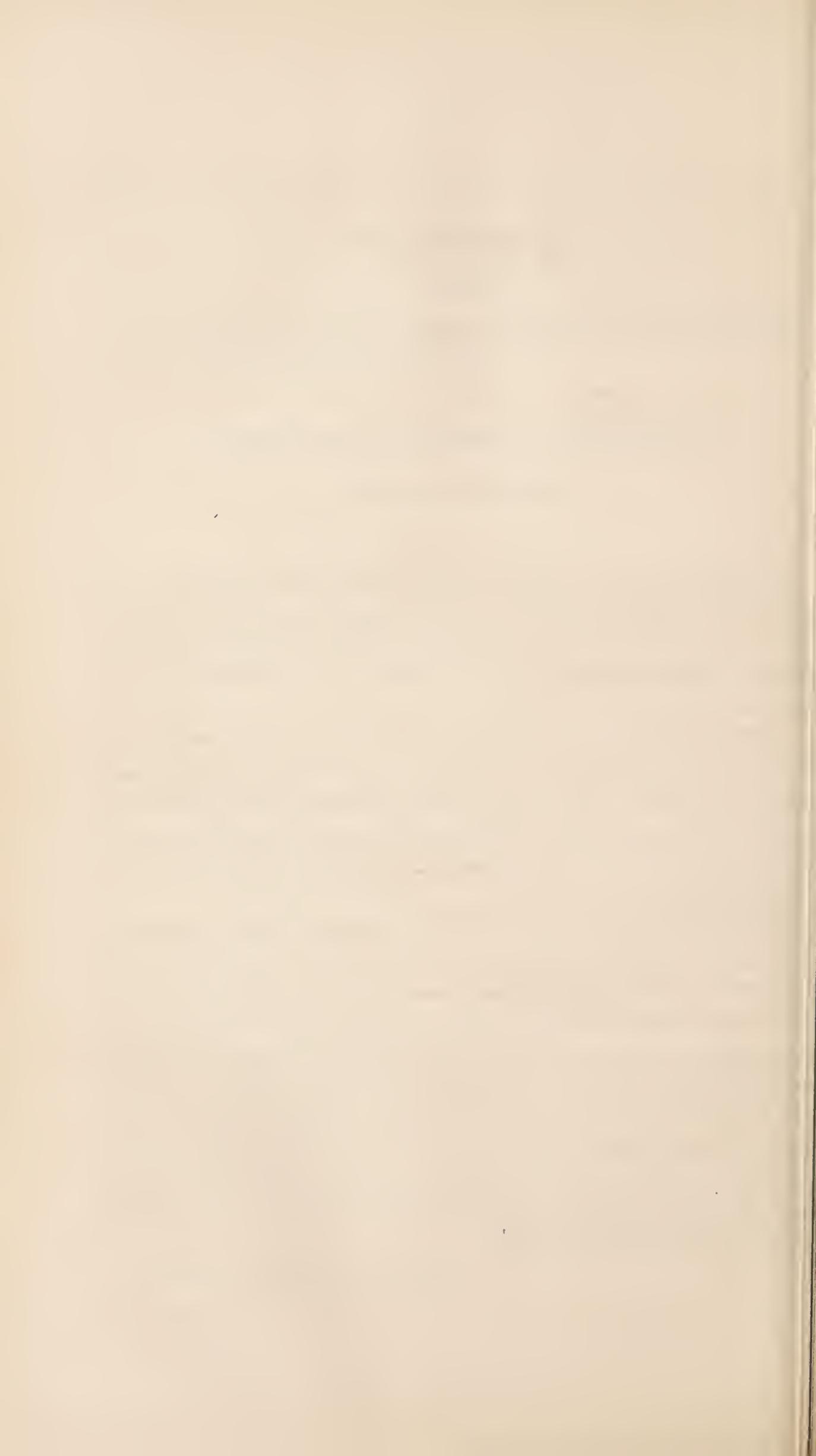
REPORT
OF THE
CHARITY COMMITTEE OF MANAGERS
OF
THE ROYAL EDINBURGH ASYLUM,
FEBRUARY 25, 1856.

As directed in the recent Act of Parliament, the Committee appointed to administer the Charitable Department of the Asylum have now to present their Annual Report, which, as in former years, must be little else than what is contained in the Account of the Intromissions for the past year.

The whole of the cases receiving aid from the Charity Fund at the date of last Report still continue on the Roll, along with two others of a similar nature, which were investigated with all the care possible on the part of the Committee, and were severally reported and approved by the General Board of Managers at the time of their being disposed of.

The total amount of the Fund is now £3,383 10s. 9d.; and being now only in the fifth year since its institution, it was only by a combination of favourable circumstances that it could have attained the amount within so short a period. Should it now be resolved to discontinue, for a time, the contributions from the General Funds of the Asylum, by which this Fund has been hitherto fostered, the loss will be less severely felt than it must have been during the earlier stage of its existence; but of course it will, in that case also, be all the more incumbent on the Committee to exercise a vigilant care in admitting none to the benefit of the Fund, but those of the most deserving and claimant nature.

GEORGE SMITH, *Convener.*



ABSTRACT

OF THE

TREASURER'S ACCOUNT FOR THE YEAR 1855.

I. CHARGE.

1. Arrears of Board given up in last Account,	£101 12 5
2. Patients' Boards,	16,051 18 6
3. Furnishings made to Patients, &c.,	357 5 11
4. Rents of Land and Houses,	84 8 3
5. Produce sold,	165 12 9
6. Loans received,	19,228 0 11
Amount of Charge,	£35,988 18 9

II. DISCHARGE.

1. Balance due to Treasurer at 31st Dec. 1854,	£382 6 11
2. Annual Disbursements for the Institution—	
1. Provisions, . . . £7,768 0 1	
2. Repairs and Furnishings, . . . 3,767 18 5½	
3. Public and Parochial Burdens, . . . 152 17 11	
4. Interests, . . . 722 9 6	
5. Feu-duty, . . . 377 3 8	
6. Water-duty, . . . 50 0 0	
7. Insurance against Fire, 23 8 0	
8. Miscellaneous Payments, 412 7 2	
	£13,274 4 9½
Carry forward,	£13,656 11 8½
	£35,988 18 9

	Amount of Charge brought forward,	£35,988 18 9
II. DISCHARGE—Continued.		
	Brought forward,	£13,656 11 8½
3. Salaries, &c. :—		
1. Resident Physician,	£460 0 0	
2. Assistant ditto, .	69 6 9	
3. Second Assistant ditto,	37 4 4	
4. Consulting ditto, .	25 4 0	
5. Matron, . .	105 0 0	
6. Chaplain, . .	80 0 0	
7. House Superintendent,	120 0 0	
8. Gardeners, .	89 10 0	
9. Gatekeeper, .	31 10 0	
10. Honorarium to Visiting Committee,	110 0 0	
11. Treasurer and Secretary,	380 0 0	
12. Attendants, &c., .	1,519 13 11½	
	—————	3,027 9 0½
4. Expense of New Buildings, . .	5,226 12 0	
5. Loans paid up, . . .	4,500 0 0	
6. Arrears of Boards outstanding, .	192 13 2	
Amount of Discharge, .	—————	26,603 5 11
Balance due by Treasurer at 31st Dec., 1855, .	—————	£9,385 12 10

A B S T R A C T

OF THE
ORDINARY INCOME AND EXPENDITURE.

I. INCOME.

1. Boards, . . . . .	. . . . .	£16,051 18 6
2. Furnishings to Patients, &c., .	. . . . .	357 5 11
3. Rents, . . . . .	. . . . .	84 8 3
4. Produce, . . . . .	. . . . .	165 12 9
Amount of Income,	—————	£16,659 5 5
Carry forward,	—————	£16,659 5 5

Amount of Income brought forward, L.16,659 5 5

II. EXPENDITURE.

1. Ordinary—

1. Disbursements and Annual Pay-

ments, as before,	.	.	L.13,274	4	9½
2. Salaries,	.	.	3,027	9	0½
					16,301 13 10

Surplus of Ordinary Income over Ordinary Expenditure, L.357 11 7

STATE OF FUNDS AT 31ST DECEMBER, 1855.

I. DEBTS.

1. Amount of Debts on Bonds and Dispositions in Security,	L.27,128	0	11
2. Accounts for the Quarter ended,	2,914	15	1
3. Outstanding Accounts, and proportion of current Feu- Duty, Interest, Taxes, &c.,	350	0	0
	L.30,392	16	0

II. ASSETS.

1. Balance due by Treasurer,	L.9,385	12	10
2. Arrears of Boards as before,	192	13	2
3. Provisions and Stock on hand,	1,357	6	10
	10,935	12	10
Deficiency,	L.19,457	3	2

A B S T R A C T
 OF THE
TREASURER'S INTROMISSIONS
 WITH THE
FUNDS OF THE CHARITY COMMITTEE,
 FOR THE YEAR 1855.

I. CHARGE:

1. Balance in Treasurer's hands at 31st December, 1855,	L.469	1	9
2. Donations received during the year,	57	10	0
3. Interests,	135	2	6
Amount of Charge,	L.661	14	3

II. DISCHARGE.

1. Sum paid to account of Patients' Boards,	L.78	3	6
2. Sums invested,	500	0	0
Amount of Discharge,	578	3	6
Balance in Treasurer's hands at 31st Dec., 1855,	L.83	10	9

STATE OF FUNDS AT 31ST DECEMBER, 1855.

1. Amount held in Loan by the Managers of the Asylum,	L.3,300	0	0
2. Balance in Treasurer's hands, per preceding account, .	83	10	9
	£3,383	10	9

PHYSICIAN'S ANNUAL REPORT

OF THE

ROYAL EDINBURGH ASYLUM FOR THE INSANE,

FOR THE YEAR 1855.

*Read at the Annual Meeting of Contributors, held on the
25th day of February, 1856.*

TABLE I.—*General Results of the Year.*

	Males.	Females.	TOTAL.
Number of inmates at the close of 1854, Admitted during the year 1855, . . .	262 109	277 114	539 223
Total number under treatment, . . .	371	391	762
Discharged, M. F. T. 90 91 = 181.			
Of whom were Cured, . . .	46	49 = 95	
... ... Uncured, . . .	44	42 = 86	
Deaths, . . .	24	38 = 62	
	114	129	243
Total number at the close of 1855, . . .	257	262	519

Average number daily resident during the year 1855.

Males.	Females.	Total.
267 ¹⁸⁶ ₃₆₅	278 ⁹⁶ ₃₆₅	545·8

From this table, it appears that, during the past year, 223 patients were admitted into the Asylum, of whom 109 were males, and 114 females.

At the close of the year 1854, there were 539 patients in the Asylum, so that 762 individuals labouring under insanity have been treated during the past year within the walls of the Institution, while the average number resident was 546.

Of the entire number, 243 were removed during the year,—95 recovered, 86 unrecovered, and 62 by death, leaving, at the close of 1855, 519 inmates.

The recoveries were thus in the ratio of 42.6 per cent. to the admissions, or 17.4 per cent. to the mean number resident. The mortality was in the ratio of 11.4 per cent. to the average number resident, or 8 per cent. to the entire number under treatment.

The recoveries are nearly the same in number as those of 1854, and compare favourably with those of public Asylums, situated as this one is in regard to the nature of the cases admitted.

The number of patients admitted into the Asylum since its foundation now amount to 3588, and of these 1498 recovered, being in the ratio of 41.75 per cent., or nearly 49 per cent, deducting those remaining under treatment.

The mortality is somewhat higher than it was in 1854, but considerably less than the average of previous years.

The inmates of the Asylum suffered from a very general epidemic of influenza during the past year, affecting a very large proportion of them ; and it is a subject of congratulation that the epidemic was a mild one, and that the mortality is so small, when it is remembered that a great number of the patients are old and infirm, and ill prepared to resist the shock of such a disease.

During the earlier part of the year, upwards of 80 patients were refused from want of accommodation ; some of these belonged to the higher classes, but the majority were paupers. Since the month of September, a large number of paupers have been removed to the lunatic wards now attached to St. Cuthbert's workhouse. This has relieved the crowded state of the Western Department, and has enabled me to receive all the pauper patients for whom admission has been solicited since that date. The Asylum now contains fully as many patients as it is calculated to accommodate with comfort ; and it is hoped that the early completion of the buildings now in course of erection, will enable us to meet the wants of the community in regard to their insane poor.

Since the month of June 1854, upwards of 82 patients have been removed from the Asylum to various workhouses ; and although this has been a boon to the public, and to this Asylum, in one respect,

inasmuch as it has enabled us to provide accommodation for nearly as many recent cases, most of which would have been refused admission for want of room, and thus deprived of the chances of cure afforded by the Asylum ; yet, it must be confessed, that the change from the Asylum to the workhouse has not been a boon to many of the unfortunate subjects of this transference. However comfortable the wards of a workhouse may be made, they cannot for a moment be compared with those of a well-regulated Asylum. In the former, the bare necessities of an economical existence are provided, and nothing more. In the latter, to the comforts and necessities of life, are superadded some of the enjoyments which a beneficent Providence lavishes upon the world at large, and which an enlightened philanthropy extends to the unfortunate victims of mental derangement, not only as a means of cure, but as a source of happiness and alleviation from an irremediable disease, which, worse than leprosy, separates its victims from the busy and happy world, from the companionship of friends, and the blessings of home. If "lunatic wards" are to be sanctioned as lawful adjuncts of our workhouses, surely their inmates ought to be limited to the utterly hopeless and fatuous imbeciles, who are incapable of appreciating any of the comforts of an Asylum ; but as long as intelligence, and the capability of enjoyment remain, even in partial operation, the victims of a disease which entails so much suffering, should not be cut off from healthy and cheerful occupation—from a ramble in the green fields, from the soothing influences which music and reading, and society and harmless amusements, can afford. The Government Inspectors of Asylums in Ireland, in their last Report, strongly insist upon the principle that "poor-houses are not fit places for the insane, no matter under what denomination the disease itself may be classed."* The Irish Inspectors propose to supply accommodation

* The subject is thus more fully and most justly expressed in the Report referred to. "Taking a broad view of the question, it is obvious, for many reasons, that the most suitable place for every demented person, lunatic or idiot, harmless or otherwise, is an Institution specially devoted to the care of the insane, under the superintendence and management of experienced officers and attendants, who are practically acquainted with the treatment of

for the insane poor at present confined in the union workhouses, by erecting auxiliary buildings of the least expensive kind upon the grounds of the existing Asylums, and placing them under the same management as the Asylums. In this way, the chronic and incurable cases which now crowd the wards would also be provided for in the best and least expensive manner, and thus make room for recent and curable cases in the Asylum. It may be in the recollection of some of the Managers, that in your Report for 1845, a similar plan was suggested. The Report states,—“The least expensive, and perhaps the most advisable remedy, for this state of affairs (the accumulation of incurable patients), would be the erection of a separate building for the imbecile and less curable, apart from the main establishment. * * * * * By being separated from the other, and not requiring the same elaborate arrangements, this ad-

mental disease in every form, and directed and controlled by that department of the public service, to which the supervision of all matters relating to such establishments properly belongs; and we regard the question as deserving the consideration of the executive,—namely, whether the time may not have arrived for making provision for the complete separation of the insane poor, of every class, from the sane portion of the community; and which, whilst effecting a moral duty towards the latter, would insure for the insane poor, idiotic or imbecile, more care and comfort than they can possibly have in ordinary workhouses, where they cannot at all times be secured against annoyance from the ignorant or thoughtless paupers by whom they are surrounded. We feel that objections to a change may be advanced on financial grounds, and that it may be argued, considering the extremely low position which, particularly the idiotic inmates of poor-houses, occupy in the human family, both socially and mentally, that they are comfortably circumstanced, and sufficiently well cared for at present.”

“It is evident, however, that the attention and care necessary for the relief of these distressed classes cannot be efficaciously extended to them whilst they are placed in institutions of a very different nature from Asylums; and further, it would be falling into a great mistake to imagine, that even the most miserable objects of mental incapability are beyond the reach of being relieved; for there is no species of disease or affection, from the highest state of maniacal excitement to the very lowest grade of imbecility, that does not admit of cure or alleviation under judicious treatment, such alone as can be obtained in establishments exclusively devoted to the object.”—(*Seventh Report of the Inspectors of Lunatic Asylums in Ireland.*)

ditional building might be erected on a less expensive plan, so as not only to accommodate a large number of patients, but also to diminish, for the whole Institution, the average cost of their maintenance." The same plan has of late been strongly advocated by Dr. Bucknill, the accomplished physician of the Devon County Asylum, in consequence of the accumulation in that Institution of chronic and incurable cases, to the exclusion of recent and curable ones. It may interest you also to know, that there the experiment has actually been made on a small scale, and in a manner which may suggest the propriety of our converting some of the means at our disposal into a similar use. A certain number of cottages on the present grounds of that Asylum have been used for the purpose referred to, and the removal of a selected portion of the patients to these cottages has been followed by the most beneficial results. "These cottages are much preferred to the wards by the patients themselves, and permission to reside in them is much coveted." A further extension of the same experiment has been made by boarding a few selected patients with cottagers in the immediate neighbourhood of the Asylum. These cottagers are selected and trust-worthy persons, some of whom have been attendants in the Asylum, or have married Asylum artizans. The patients and persons in charge of them continue to feel themselves under the eye of the Medical Superintendent, who visits them unexpectedly, and the plan promises, it is said, to work extremely well. A similar system has long been in operation on a larger scale in the village of Gheel, in Belgium, and is described as attended with the best results. These facts, I think, render it well worthy of the careful consideration of the Managers, how far some of the houses composing the village of Tipperlin might be converted into abodes for a certain class of the patients, both with advantage to them, as affording them a home far superior to the wards of a workhouse, and, in some respects, superior to the wards of an Asylum itself, and, at the same time, with advantage to the community, by diminishing the average cost of the maintenance of the inmates.

The following table shows the period of residence in the Asylum of those patients who were removed uncured :—

TABLE II.—*Period of Residence of those Uncured at their Removal.*

	Males.	Females.	Total.
Under 1 week,	0	1	1
„ 2 months	2	2	4
„ 3 „	2	0	2
„ 4 „	3	2	5
„ 5 „	2	1	3
„ 6 „	2	2	4
„ 1 year,	4	2	6
„ 2 years,	6	2	8
„ 3 „	7	6	13
„ 4 „	2	5	7
„ 5 „	4	4	8
„ 6 „	3	2	5
„ 7 „	0	2	2
„ 8 „	1	1	2
„ 9 „	1	0	1
„ 10 „	0	1	1
„ 11 „	1	4	5
„ 12 „	1	0	1
„ 13 „	0	1	1
„ 14 „	1	4	5
„ 15 „	2	0	2
Total, . . .	44	42	86

From this table it appears that 86 patients were removed uncured, being the largest number removed, in any one year, from the Asylum. By far the greater number of them were incurable, and many of them had spent a considerable number of years in the Asylum. One case appears in the table as removed within a week after admission. This was a female sent at the instance of the Procurator-Fiscal as dangerous (under the 4th and 5th Vict., cap. 60.), who had formerly been an inmate of the Asylum. On her re-examination before the Sheriff, previous to her final committal, the Inspector of Poor, who seemed to suspect her of feigning Insanity in order to gain re-admission to the Asylum, objected that this Asylum was too good for her, whereupon the Sheriff consigned her to another place.

Of the cases removed uncured within two months of their admission, one was a young female who became insane in consequence of the sudden death of her father. She was very suicidal on admission, but appeared to be recovering, when she was prematurely removed by the Inspector of Poor, contrary to the strongest remonstrances. She was brought back within six weeks in a worse con-

dition than ever, and continues now, after nearly eight months, in a state of very deep despondency. Another of these cases, removed on the 7th of April, in spite of remonstrance, was brought back on the 16th, in a much worse condition than when she left, and has continued to this date to be a burden upon the parish of her settlement. Another of these cases, after being re-admitted, was removed a second time in a worse condition than ever, and that, although he was, in my opinion, highly dangerous to be at large.

Two of these early removals were made by relatives, the Patients not being paupers. One of them returned in three days, begging to be re-admitted, as he did not feel safe from his own hands beyond the walls of the Asylum ; the other committed suicide by cutting her throat within a few weeks after her removal.

Only two of the uncured cases, as far as I can ascertain, recovered after their removal.

The next table exhibits the ages of those admitted and of those discharged cured.

TABLE III.—*Ages of those Admitted and those Discharged Recovered.*

AGE.	ADMITTED.			DISCHARGED RE-COVERED.			PER CENTAGE OF RE-COVERIES.
	Males.	Females.	TOTAL.	Males.	Females.	TOTAL.	
From 10 to 20,	9	6	15	3	4	7	46·7
„ 20 „ 30,	33	34	67	14	16	30	44·8
„ 30 „ 40,	34	31	65	14	14	28	43·1
„ 40 „ 50,	17	24	41	7	10	17	41·5
„ 50 „ 60,	14	13	27	7	3	10	37·0
„ 60 „ 70,	0	3	3	0	1	1	33·3
„ 70 „ 80,	2	3	5	1	1	2	40·0
Total,	109	114	223	46	49	95	42·6

The per centage of recoveries diminishes with advancing age,—although in this table the per centage appears to be rather small under twenty years of age, being modified, as it generally is, by the admission of congenital imbeciles, or incurable epileptics, at an early age. The per centage of recoveries above seventy years of age is, on the other hand, accidentally very large ; but of these aged persons, those who did not recover, died within a short period of their admission,—being, indeed, in a dying state when they came.

The following table exhibits the various forms of Insanity under which the patients, admitted during the past year, laboured at the time of their reception :—

TABLE IV.—*Form of Disease in those Admitted.*

	Males.	Females.	Total.
General Paralysis,	7	3	10
Moral Insanity,	6	5	11
Mania, Acute,	26	36	62
,, Epileptic,	5	1	6
,, Hysterical,	0	1	1
,, Puerperal,	0	6	6
,, Remittent,	1	0	1
Delirium Tremens,	1	0	1
Dementia,	11	5	16
,, Senile,	2	2	4
,, with Epilepsy,	6	0	6
,, Acute,	2	2	4
Melancholia,	24	36	60
,, With Hysteria,	1	0	1
Monomania, of Fear,	0	2	2
,, Suspicion,	13	9	22
,, Superstition,	1	1	2
,, Pride,	2	3	5
,, Unseen Agency,	1	2	3
Total,	109	114	223

The number of females affected with General Paralysis is unusually large, this disease being comparatively rare in that sex.

Not less than seven of the cases admitted came to the Asylum spontaneously, some of them who had formerly been inmates, to obtain re-admission, and some to consult me as to the propriety of their coming into the Institution, for the sake of the benefits they hoped to reap from it. Several of the patients admitted had been detained for some time in workhouses previous to their being sent to the Asylum, in the hope, doubtless, that the symptoms of insanity might pass off, or at least subside, so that they might be managed in the workhouse, and the expense of sending them to the Asylum might thus be avoided. Several had been detained a considerable time at home for similar reasons, and of these, one female, who had been ill for about two years, had been confined in a closet in her own house, and on admission, was covered with bruises, and in a state of extreme debility. It cannot, I think, be too strongly impressed upon

the community, that the earlier cases of Insanity are removed to an Asylum, the greater the chances of a speedy cure, and the less the chance of their being a prolonged burden upon the ratepayers or friends of the patient.

A considerable number of the patients were brought to the Asylum under false pretences,—such as the promise of employment, the assurance that they were to recover stolen property, that they were coming to visit friends, &c. These deceptions exercise, most commonly a very baneful influence upon the after treatment of the patient: they are dwelt upon as the sole cause of their confinement, as evidence of the perfidy of their friends, and are apt to generate distrust and dislike towards the Asylum, and aversion to all the remedies offered for their cure.

I cannot omit to notice the shocking practice of bringing patients to the Asylum in irons. It appears that policemen and Sheriff-officers, and even Inspectors of Poor, especially in the remote districts of Scotland, are still under the influence of the vulgar prejudice that insane persons must be dangerous. One of the patients thus forwarded was a soldier, who was paralytic and imbecile, yet his hands and feet were ironed, his hands being ironed *behind his back*. Another, who had his hands ironed behind his back, was perfectly *stupid*; and a third who bore this painful and unnecessary treatment manfully during a long voyage from the north of Scotland, complained only, and that bitterly, of the disgrace of being led through the streets of Edinburgh in this humiliating state. He was to all appearance perfectly quiet and harmless, and has continued so since his admission. It would be well if it could be impressed upon the minds of all parties to whom the duty may devolve of transmitting patients to the Asylum, that in ninety-nine cases out of a hundred, the excitement and agitation of the insane arises from terror and not from anger, and that they should be the objects of tenderness and not of constraint; and, further, in regard to the cases of real violence, it is certain, that one sane person, with ordinary tact and presence of mind, is more than a match for any insane person, without having recourse to manacles or instruments of restraint, which only engender the irritation and violence which seems so much to be dreaded.

The following table illustrates the frequency of the suicidal impulse in those admitted :—

TABLE V.—Illustration of Suicidal tendency in those Admitted.

	Males.	Females.	Total.
Have attempted Suicide,	2	13	15
Have meditated Suicide,	15	17	32
Total,	17	30	47
<i>Form of Insanity during which Suicide was attempted.</i>			
Acute Mania,	0	3	3
Moral Insanity,	1	0	1
Melancholia,	1	8	9
Monomania of Fear,	0	1	1
General Paralysis,	0	1	1
Total,	2	13	15
<i>Form of Insanity during which Suicide was meditated.</i>			
Acute Mania,	1	5	6
Epileptic, „	1	0	1
Melancholia,	9	8	17
Monomania of Suspicion,	3	1	4
„ „ Superstition,	0	1	1
„ „ Pride,	1	1	2
Senile Dementia,	0	1	1
Total,	15	17	32
<i>Means used in Attempts made—</i>			
Strangulation,	0	6	6
Drowning,	0	4	4
Suspension,	1	0	1
Choking,	0	1	1
Cutting Throat,	1	5	6
Precipitation,	0	2	2
Poison,	0	2	2
Burning,	0	1	1
Total,	2	21	23

Although the attempts made were less frequent than in former years, I regret to say that, in one case, the attempt was successfully made by a female, who hung herself before she was discovered. This female was ordinarily industrious, active, and cheerful, and had never manifested any suicidal tendency ; the act was apparently sudden, impulsive, and unpremeditated,—and being thus unexpected,

was not guarded against, as in patients known to harbour such an impulse. This is only the second case of suicide which has occurred within the Asylum during the last ten years,—a circumstance to be attributed partly to the vigilance of those in charge, and partly, also, to the extent to which the dormitory system has been carried in the sleeping arrangements of this Asylum.

In relation to this subject, one remarkable and novel incident occurred during the past year : a young female, who had for months made repeated and daily attempts to commit suicide, was detected in the act of assisting another female to destroy herself by strangulation.

The next table shews the causes of the disease in those admitted, so far as they could be ascertained.

TABLE VI.—*Causes of Disease in those Admitted.*

	Males.	Females.	Total.
Anxiety,	5	6	11
Terror,	0	2	2
Remorse,	0	1	1
Grief,	0	7	7
Disappointed Affection,	0	6	6
Reverses of Fortune,	4	3	7
Poverty,	0	1	1
Domestic Disagreements,	0	4	4
Imprisonment,	3	1	4
Religious Anxiety,	0	2	2
Over Study,	1	0	1
Recent Marriage,	2	0	2
Intemperance,	21	7	28
Epilepsy,	8	1	9
Apoplexy,	2	1	3
Cerebral Disease,	3	2	5
General Paralysis,	4	2	6
Injury of Head,	2	0	2
Child Bearing,	0	6	6
Amenorrhœa,	0	6	6
Climacteric Change,	0	3	3
Secret Vice,	4	1	5
Arrest of Spermatorrhœa,	1	0	1
Bad Health,	8	8	16
Continued Fever,	1	1	2
Old Age,	1	2	3
Hereditary Predisposition,	8	3	11
Previous Attack,	10	23	32
Unknown,	21	15	36
Total,	109	114	223

I remarked in my last Report, that intemperance, which formerly figured as the cause of Insanity in one-third of the cases admitted, had diminished to the ratio of one in four. During the past year, it would appear from this table to be still undergoing a further diminution in frequency, as the exciting cause of this malady. It was the cause ascribed in only 12·5 per cent. of the whole cases admitted, or 19 per cent. of the male patients only.

The frequency of relapses, and the extent to which previous Insanity strengthens the predisposition to this disease, is illustrated by the fact, that 32 patients had suffered from one or more attacks anterior to their admission. Two young men became insane immediately after their marriage, one of whom had been on two occasions an inmate of the Asylum about seven years ago, but had continued quite well up to the occurrence of this eventful change in his condition. One of the patients admitted in 1854, had laboured under symptoms indicating a tendency to some affection of the brain three or four years before ; and after completely recovering from those symptoms, under exemption from severe mental work, and the healthy influence which a country life afforded, he was seized with General Paralysis a few weeks after marriage. Several cases of young females becoming insane immediately after marriage, were noticed in a previous Report.

Of the cases ascribed to imprisonment, three had become insane during their residence in the General Prison at Perth ; and at the conclusion of their term of imprisonment, were brought to Edinburgh to be pounced upon immediately after the form of their liberation was gone through, and sent here as insane. The burden of their maintenance was thus saddled upon the parish in which they were thus *found* insane, at the risk of their becoming a burden upon that parish for life. This appears to be another of the many evils arising from the want of a Criminal Lunatic Asylum for Scotland, where all such cases would be provided for out of the Consolidated Fund, or at the cost of the general community.

Two cases were ascribed to religious anxiety or excitement. It is not a little remarkable that both of them, and a third case, which occurred about the same period, were all ascribed to the impressive pulpit eloquence of the same clergyman.

Of the six cases of Puerperal Mania, none had taken chloroform during labour. I refer to this subject once more, for the sake of correcting a statement made in an account of this Asylum, which recently appeared in one of our Journals, where it is stated that the only female who took chloroform became insane ; whereas the statement contained in the Report from which this announcement professed to be extracted, was that of all the females who had been brought to the Asylum with Puerperal Mania, since the introduction of the use of chloroform, forty-four in number (now fifty), *only one* had taken this anæsthetic agent during labour. This fact surely leads to the inference, that the use of chloroform does not conduce to the development of Puerperal Mania ; otherwise in Edinburgh, where it is so freely and extensively used, many cases of Puerperal Mania would have been brought to the Asylum in which this agent had been given. Indeed, from the absence of such cases in the statistics of this Asylum, and the fact that only one case in fifty of Puerperal Mania had received chloroform during labour, it may rather be inferred, that chloroform diminishes instead of increasing the tendency to this disease after parturition. Of the cases of General Paralysis admitted, two were printers (compositors), and both were treated hydropathically previous to admission, and at the same hydropathic establishment.

The following table shews the form of disease in those recovered.

TABLE VII.—*Form of Disease in those Discharged Recovered.*

FORM OF DISEASE.	Males.	Females.	Total.
Moral Insanity,	2	1	3
Mania, Acute,	19	21	40
, Epileptic,	2	1	3
, Puerperal,	0	3	3
, Hysterical,	0	1	1
Delirium Tremens,	1	0	1
Dementia,	0	1	1
Melancholia,	14	16	30
Monomania of Pride, . . .	0	1	1
, , Suspicion, . . .	8	4	12
Total, . . .	46	49	95

This table gives the form of Insanity at the time of admission ; but it not unfrequently happens that the disease undergoes one or

more changes in its form during residence in the Asylum. Of these changes, the most frequent are the gradual termination of other forms of Insanity in Dementia or Fatuity ; but occasionally Melancholic patients become Maniacal, or present other changes. One patient was admitted three times, and on her first admission she was Demented, on her second she had Melancholia, and on her third Acute Mania,—reversing the usual sequence of these varieties in the form of the disease.

Some of the cases classed under the name of Monomania of Suspicion, presented great difficulties in diagnosis, the persons affected concealing their delusions with great craft. One or two cases of this kind dismissed cured, had all their delusions re-developed immediately after returning to the locality and associations with which they were connected.

The next table shews the duration of disease previous to admission in those who recovered.

TABLE VIII.—*Duration of Disease previous to Admission in those Discharged Recovered.*

DURATION OF DISEASE.	Males.	Females.	Total.
Under 1 week,	5	3	8
" 2 "	9	6	15
" 1 month,	9	20	29
" 2 "	5	0	5
" 3 "	3	5	8
" 4 "	1	2	3
" 6 "	7	2	9
" 7 "	0	1	1
" 9 "	0	1	1
" 1 year,	1	1	2
" 2 "	1	1	2
Unknown,	5	7	12
Total, . . .	46	49	95

This table illustrates the well-established fact, that the earlier cases of insanity are placed under treatment in an Asylum, the greater their chances of cure.

The same truth is still more forcibly illustrated in the table which follows, shewing the duration of the disease at the period of admission in all the cases admitted, and distinguishing the curable from

the incurable cases. It will be seen from this table that a very great proportion of the early cases are curable, and that a large number of them, as appears from the last column of the table, have already recovered, and left the Institution.

TABLE IX.—*Duration of Disease previous to Admission, and the Condition of those Admitted.*

DURATION OF DISEASE.	Total.	Considered Incurable.	Considered Curable.	Of whom already dismissed Cured.
Under 2 weeks,	49	0	49	20
," 1 month,	27	0	27	12
," 2 "	19	6	13	3
," 3 "	12	4	8	2
," 4 "	7	0	7	1
," 5 "	1	0	1	0
," 6 "	11	1	10	2
," 10 "	4	3	1	0
," 1 year,	15	8	7	3
," 2 "	13	10	3	1
," 3 "	7	6	1	0
," 5 "	4	3	1	0
," 6 "	7	7	0	0
," 8 "	1	1	0	0
," 10 "	2	2	0	0
," 11 "	1	1	0	0
," 14 "	1	1	0	0
," 20 "	1	1	0	0
Unknown,	40	24	17	3
Total,	222	78	145	47

The inferences to be deduced from the preceding tables have been clearly established by the Reports of all Asylums for many years past; but I think it not out of place to illustrate them once more in the most forcible manner, in order, if possible, to shew the impolicy of a practice which seems to be a growing one, that of taking insane persons into the workhouse for a time, in the hope of avoiding the expense of Asylum treatment—a practice which tends only to make the subjects of such experiments burdens on the community for life.

Considerably more than one-half of the recoveries took place within six months after admission, about one-fourth only after one year's residence, as appears from the following table:—

TABLE X.—*Period of Residence of those Discharged Recovered.*

PERIOD OF RESIDENCE.	Males.	Females.	Total.
Under 1 month,	1	1	2
" 2 "	6	2	8
" 3 "	7	6	13
" 4 "	2	7	9
" 5 "	3	5	8
" 6 "	7	6	13
" 7 "	2	5	7
" 8 "	1	0	1
" 9 "	3	2	5
" 10 "	0	1	1
" 11 "	1	1	2
" 1 year,	1	2	3
" 2 "	7	7	14
" 3 "	4	2	6
" 4 "	0	1	1
" 5 "	0	1	1
" 6 "	1	0	1
Total,	46	49	95

The causes of death are exhibited in the succeeding table.

TABLE XI.—*Causes of Death.*

CAUSE OF DEATH.	Males.	Females.	Total.
General Paralysis,	6	0	6
Epilepsy,	1	0	1
Apoplexy,	0	3	3
Chronic Tubercular Meningitis,	1	0	1
Phthisis,	4	13	17
General Tuberculosis,	1	3	4
Pneumonia,	0	4	4
Bronchitis,	0	1	1
Gangrene of Lung,	0	2	2
Morbus Cordis,	3	0	3
Carcinoma,	0	1	1
Peritonitis,	0	0	0
" from Perforating Ulcer,	1	1	2
Dysentery,	1	1	2
Diarrhoea,	0	2	2
Bright's Disease,	0	2	2
Dropsy,	1	0	1
Exhaustion,	2	2	4
" from Acute Mania,	0	1	1
" " Suppuration of Knee Joint,	1	0	1
Hanging,	0	1	1
Tobacco Poisoning,	1	0	1
Erysipelas,	0	1	1
Gangrene of Feet,	1	0	1
Total,	24	38	62

Of the sixty-two deaths, it may be said that only sixteen died from Insanity, and the remainder from disease more or less frequently associated with it. One patient died from poison seven hours after admission, having swallowed a large quantity of tobacco on his way to the Asylum. Of this case I have published the details elsewhere.* One-third of the deaths were attributable to Tuberculosis, one of the most frequent concomitants of Insanity.

The ages of the patients who died appears from the following

TABLE XII.—*Ages of those Deceased.*

AGES.	Males.	Females.	Total.
From 20 to 30 years of age, .	5	3	8
" 30 " 40 " " .	8	11	19
" 40 " 50 " " .	3	9	12
" 50 " 60 " " .	4	10	14
" 60 " 70 " " .	2	3	5
" 70 " 80 " " .	2	2	4
Total, . .	24	38	62

The duration of their residence in the Asylum is here shewn.

TABLE XIII.—*Period of Residence of those Deceased.*

PERIOD OF RESIDENCE.	Males.	Females.	Total.
Under 12 hours, . . .	1	0	1
" 1 week, . . .	0	1	1
" 2 " . . .	1	2	3
" 1 month, . . .	2	2	4
" 2 " . . .	1	2	3
" 3 " . . .	1	0	1
" 4 " . . .	0	1	1
" 6 " . . .	2	1	3
" 1 year, . . .	2	5	7
" 2 " . . .	5	6	11
" 3 " . . .	0	3	3
" 4 " . . .	2	1	3
" 5 " . . .	2	2	4
" 6 " . . .	1	2	3
" 7 " . . .	0	3	3
" 8 " . . .	1	0	1
" 9 " . . .	0	1	1
" 10 " . . .	2	0	2
" 11 " . . .	0	1	1
" 12 " . . .	0	2	2
" 13 " . . .	1	3	4
Total, . .	24	38	62

* Monthly Journal of Medicine, Jan 1856, p. 643.

The first case in this table is the case of poisoning referred to. Several patients were in a dying state when admitted ; one laboured under Pneumonia, and died on the 15th day ; another laboured under Heart Disease, was 78 years of age, and died on his seat six days after admission. In addition to this aged person, three others were above 70 years of age, and all in a dying condition when admitted. They lingered on a few weeks, and then died.

The pathological appearances found on examination after death, are detailed in an Appendix to this Report. They add little to the results of former years, beyond the confirmation of the general inference, that Insanity is a disease of the brain, the pathology of which is yet but imperfectly known.

The treatment of the patients has been pursued on the same principles as formerly. I continue to derive very decided and striking effects occasionally from the use of the prolonged warm bath in acute cases. Three cases of Mania recovered within a week under this treatment ; and one of them, in writing to her friends at the time, ascribed her cure to this cause. It not unfrequently happens, that patients in a state of raving madness, when in the warm bath, with cold applied to the head, recover their tranquillity and reason, and will give coherently an account of their illness, and the causes which led to it, even when, as generally happens, the mental perturbation returns after removal from the bath. A lady whom I attended, and who was insane for about 12 months, remembered nothing of all the events of that period, but the single circumstance of her being in a bath, of which, and of all the persons surrounding her at the time, she had a distinct and accurate recollection. Next to the prolonged bath, the judicious employment of sedatives, and the appropriate treatment of local diseases where these exist, are the most effective therapeutic agents in the treatment of Insanity. Active occupation, particularly in the open air, continues to afford all the advantages hitherto attributed to it. It is unnecessary to repeat here the numerous sources of employment afforded to the inmates of this Asylum, so frequently described in former Reports, and of which the Abstract of Work executed, appended to this Report, gives a general idea.

A considerable addition has been made to our Library, partly from the funds of the Asylum, and partly from the donations of

friends, but more particularly by the gift of 300 volumes from the Curators of the Writers to the Signet's Library,—an example which, it is hoped, may be followed by other Public Libraries or individuals, when they accumulate duplicates, or partially damaged works. The library and the numerous periodicals and newspapers, now so greatly increased by their daily issues, afford a most important source of beneficial and pleasing occupation to the reading part of our community.

The amusements and recreations of former seasons were continued during the past year. Of these, out-door games, such as quoits, bowls, cricket and curling, and excursions to the country, or to the sea-side during the bathing season, may be mentioned as the most beneficial. We were frequently indebted to the Instrumental Band connected with Messrs Nelson's printing establishment, and to the Edinburgh Temperance Band, for attendance on the ground during cricket matches, and to the kind offices of many professional and amateur performers for music and songs to enliven our weekly concert and dance.

A very superior Billiard Table having been procured for the new room in the Eastern House, the old one was removed to the Library in the Western House, where it affords a source of cheerful and useful recreation, after work-hours, to the inmates of that department.

A Museum of Natural History and Geology has been commenced, and already presents a very interesting collection of specimens. A handsome donation of British Shells, by Lieut. Thomas, R.N.; and of Mineralogical Specimens from Germany, by Mr Stilwell; and of numerous specimens, both in Conchology and Entomology, by Dr Howden,—has already made the Museum an object of attraction and interest.

When the new Wing and Separate Building, now in course of erection, are completed, which it is hoped will take place during the current year, the condition of the inmates of the Western Department will be materially improved. A department for *males*, at an intermediate rate of board, between that of the paupers and higher classes, will then be opened, and will prove, I have no doubt, a great boon to the community. I can only express my deep regret, that

the circumstances of the Asylum are not such as to enable you at once to complete the Asylum buildings, along with the new Washing-house and Laundry, without which we must continue to work under serious disadvantages in regard to this part of our domestic arrangements.

In conclusion, I beg to thank the Managers, and the various officers of the Institution, for their co-operation with me in carrying out the great objects of the Institution—the cure and alleviation of this sad and calamitous disease, and to express a hope that, by our joint efforts, the prosperity of the Institution may continue to increase with its growth, and that it may confer its benefits, with undiminished efficacy, over a wider circle of those for whose happiness and restoration to health it has been founded.

DAVID SKAE, M.D.

CHAPLAIN'S REPORT.

In looking back at the past year, it is satisfactory to think, that it is only just to give a favourable Report of the religious interests of the Asylum ; and that there is every reason to believe the solemn and sacred duties in which the inmates engage are productive of the best effects. The same services have been kept up on the Sabbaths. Prayers have been regularly attended to in the mornings of the week-days in the chapel ; the reading of the Scriptures and other religious exercises have been carefully observed in the various wards and parlours of the Institution ; and the usual visits of the Chaplain have been made to the inmates of the House, and received in such a manner as to shew that his office is duly appreciated. It is right however to state, that a place entirely appropriated for the purposes of religion would produce still more beneficial effects ; and circumstances which have come under my notice, render it only an act of justice to record this opinion.

Books of a moral and religious nature are much read by the inmates, and they derive great interest from tracts furnished by those who are desirous to promote their comfort. It is right to mention, that the "Leisure Hour," and the "Sunday at Home," are properly

and highly esteemed. Such works are fitted to convey much useful instruction, and produce a soothing influence on the mind ; and they are free from all acrimony of sentiment, and the spirit of controversy, which is a very great and obvious recommendation.

In preaching the gospel, it seems necessary to avoid intricate and perplexing discussions as much as possible ; and whilst it is necessary to endeavour to explain and remove difficulties, great plainness of speech must be maintained ; and the same maxim must be kept in view in speaking to the sick and the dying, and in endeavouring to console and support the sorrowful and desponding. A word fitly spoken may be more valuable in such cases than a long and studied harangue. The great matter is, to lead all to confide in the righteousness of the Saviour, to convince them that the Holy Spirit is the only perfect teacher, and that faith in the Redeemer, if it is genuine and sincere, will certainly produce the fruits of holiness.

In two or three cases which have come under the notice of the Chaplain, it has been stated, that the mind has been affected by the striking discourses of an accomplished and very popular clergyman ; and it is rather a striking coincidence that this should have happened with several members of the congregation of the same gentleman. But from conversation with at least one of the persons alluded to, it appears that other causes had predisposed to the attack, and that the intellect was partly disordered before listening to the fervent appeals of the minister of the Word. Considering the good effects produced by preaching on the minds of men in general, and its soothing influences in the case of the insane, there is no reason to conclude, that evil generally results from the faithful exposition of the Scriptures of Truth.

The conduct of these persons is to be deplored, who wilfully and habitually absent themselves from the services of the sanctuary, who destroy their health, weaken their energies, and superinduce disease by their wayward behaviour. And, regardless of all consequences, they spend the time which ought to be occupied in the house of prayer in pursuits which set the wrath of God at defiance, and pour contempt on his goodness and love.

During the last year, a number of the inmates have been removed from the Asylum at Morningside, to places which have been pro-

vided for their reception. The Chaplain has repeatedly visited one of these places, and has been received in a manner which caused the warmest emotions. The kind looks of those who were nearly or altogether imbecile, the frankness of one or two who had formerly evidenced sullenness and indifference, and the affectionate manner of those whose complaints are scarcely discernible, and of some who were convalescent, were sufficient proofs of the responsibility of his office, and the necessity of keeping in view the manner in which it must be discharged.

On the first day of this year, the Chaplain visited every part of the Asylum, and was warmly greeted by the whole of the inmates. In the Separate Building, the males behaved with the greatest quietness and propriety. If the females in the refractory ward were widely different in their behaviour, he has no reason to consider their welcome less sincere. Indeed, there was an extravagance in their attention, which might be condemned by a person not acquainted with them. In all other parts of the House, both males and females behaved with the greatest calmness and propriety ; and the whole of the inmates, with the exception of a very few, who do not speak at all, shewed uniform kindness of manner, and a disposition to be agreeable. In such a situation, there are, no doubt, circumstances fitted to cause pain because of the sufferings of humanity, but there is also much to interest and encourage.

The attendants and servants, and others connected with the Asylum, appear respectful in their conduct, and attentive to their duties ; and their attendance on the services of the Chapel is most praiseworthy. They who occupy a higher position, seem anxious to promote the best interests of the Institution ; they associate in the kindest manner, and their mutual forbearance must ever be highly commended. I have to thank my clerical friends for their kind and acceptable services during the past year, and for the terms in which they have expressed themselves respecting the attendance and behaviour of the congregation. And, in conclusion, I have to thank the Managers for the attention they always shew, and for their readiness to carry out anything that may be suggested, calculated to promote the moral and religious interests of the Institution.

ROB. LORIMER.

ARTICLES.	FOR QUARTERS ENDING—				TOTAL IN W. D.	FOR QUARTERS ENDING—				TOTAL IN E. D.	TOTAL FOR BOTH DEPARTMENTS.	
	Mar. 31.	June 30.	Sept. 30.	Dec. 31.		Mar. 31.	June 30.	Sept. 30.	Dec. 31.			
Apples,.....	...	...	...	...	...	...	...	...	...	13	Gallons	Apples.
Apricots,.....	...	...	...	...	...	...	...	...	...	2	2 dozen	Apricots.
Beans,.....	...	...	173	12	...	185	...	...	...	62	pecks	Beans.
Brocoli,.....	...	66	...	2	...	68	...	99	7	106	dozen	Broccoli.
Beetroot,.....	...	...	13	13	...	...	...	9	37	46	59 dozen	Beetroot.
Brussels Sprouts,.....	...	...	...	...	...	12	3	...	12	27	27 gallons	Brussels Sprouts.
Cabbage,.....	440	488	910	864	...	2702	37	324	481	458	4002 dozen	Cabbage.
Cauliflower,.....	8	...	57	16	81	10	1	174	77	262	343 dozen	Cauliflower.
Carrots,.....	526	66	224	432	1248	392	94	235	224	945	2193 dozen	Carrots.
Celery,.....	39	74	...	...	113	74	48	...	14	136	249 dozen	Celery.
Cress,.....	...	36	...	...	36	...	15	3	...	18	54 bundles	Cress.
Cherries,.....	...	...	...	...	...	...	11	...	11	11	pints	Cherries.
Currants,.....	...	...	...	...	...	...	89	...	89	89	pints	Currants.
Gooseberries,.....	...	...	...	...	...	...	483	...	483	483	pints	Gooseberries.
German Greens,.....	12	...	...	...	...	...	...	...	...	146	dozen	German Greens.
Kidney Beans,.....	480	500	187	1167	10	...	...	...	40	34	73 gallons	Kidney Beans.
Leeks,.....	...	1	32	12	112	10	...	...	...	40	546	1713 dozen
Lettuce,.....	...	24	52	...	76	...	60	53	142	120	196 dozen	Lettuce.
Melons,.....	...	...	...	...	...	...	6	...	6	6	...	Melons.
Mustard,.....	...	43	15	...	...	...	39	...	...	39	39 bundles	Mustard.
Onions,.....	...	...	...	...	...	...	...	9	60	117	206 pecks	Onions.
Ditto, Bundles,.....	2710	2298	1360	168	2016	258	674	57	989	3086	3005 bundles	Ditto.
Potatoes,.....	...	...	488	2240	6319	749	747	504	1086	16653	16653 pecks	Potatoes.
Pease,.....	...	162	135	93	125	515	57	230	64	294	486 pecks	Pease.
Parsnip,.....	...	...	...	...	...	...	...	29	86	601	601 dozen	Parsnip.
Parsley,.....	...	...	...	...	109	204	215	152	18	680	680 bundles	Parsley.
Pears,.....	...	...	...	...	...	...	...	...	18	18	18 pecks	Pears.
Plums,.....	...	...	...	...	...	...	10	...	10	10	10 dozen	Plums.
Radishes,.....	...	119	21	140	...	138	36	...	174	314	314 dozen	Radishes.
Rhubarb,.....	...	101	...	101	...	324	229	...	563	664	664 dozen	Rhubarb.
Red Cabbage,.....	188	180	13	13	451	327	125	...	23	36	36 dozen	Red Cabbage.
Savoy,.....	...	37	14	83	51	...	98	...	500	500	827 dozen	Savoy.
Spinach,.....	...	...	...	...	...	...	...	...	106	106	157 gallons	Spinach.
Strawberries,.....	540	240	436	1420	180	48	151	274	151	151 pints	924 dozen	Strawberries.
Turnip,.....	...	...	...	...	...	...	242	242	744	744	53 pints	Turnip.
Raspberries,.....	...	...	...	...	...	...	...	...	53	53	53 pints	Raspberries.

STATEMENT OF WORK

DONE AT

THE ROYAL EDINBURGH ASYLUM,

During the Year ending 31st December, 1855.

BY TAILORS.

WESTERN DEPARTMENT.

New suits,	£238 8 9
	<i>Repairs.</i>
666 Cloth jackets repaired, at 6d. each,	L.16 13 0
1116 Pairs of trowsers, " 6d. "	27 18 0
371 Vests, " 4d. "	6 3 8
1240 Plaizing jackets, " 2d. "	10 6 8
1346 Pairs plaizing drawers, " 2d. "	11 4 4
60 Canvass dresses, " 1s. "	3 0 0
3 Coats at 6d., 29 at 1s., 1 at 1s. 3d., 7 at 1s. 6d., 1 at 2s., and 1 at 2s. 6d.,	2 6 9 <hr style="width: 20%; margin-left: 0; border: 0.5px solid black;"/>
	£77 12 5

EASTERN DEPARTMENT.

New suits,	8 1 8½
Repairs,	7 8 10
Private individuals and attendants' accounts,	32 4 0 <hr style="width: 20%; margin-left: 0; border: 0.5px solid black;"/>
	47 14 6½

BY SHOEMAKERS.

WESTERN DEPARTMENT.

New Work.	
208 Pairs of shoes for males, at 7s. 6d. per pair,	L.78 0 0
70 " do. " females, 5s. 6d. " .	19 5 0
124 " do. " do. 4s. 6d. " .	29 18 0
1 Pair of boots at 5s., 4 pairs at 6s. 6d., 2 pairs at 7s. 6d., 1 pair at 8s., 1 pair at 9s. 6d., 5 pairs at 10s., and 1 pair at 11s.,	6 4 6 <hr style="width: 20%; margin-left: 0; border: 0.5px solid black;"/>
Making belts, braces, and other sundries,	1 14 3 <hr style="width: 20%; margin-left: 0; border: 0.5px solid black;"/>
	135 1 9
Repairs.	
For male patients,	37 10 2
" female "	12 11 1 <hr style="width: 20%; margin-left: 0; border: 0.5px solid black;"/>
Carry forward,	50 1 3 <hr style="width: 20%; margin-left: 0; border: 0.5px solid black;"/>
	£548 18 8½

	Brought forward,	£548 18 8½
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By SHOEMAKERS—Continued.

EASTERN DEPARTMENT.

	L.3 14 0
New work for patients,	3 3 10
Repairs for do.	45 19 11
	<hr style="width: 100px; margin-left: auto; margin-right: 0;"/>
	52 17 9

BY PRINTERS.

	L.31 19 6
Annual report, with appendix,	25 4 0
Monthly mirror, reprints of do., contents and notices,	9 12 0
Pamphlets, poems, songs, acrostics, and list of office-bearers,	12 13 6
Circulars (various), anatomical figures and synopsis of lectures,	9 6 0
Regulations, receipts, obligations, and engagements for attendants,	11 19 6
Diet rolls, petitions, warrants, labels, and ball orders,	3 9 6
	<hr style="width: 100px; margin-left: auto; margin-right: 0;"/>
	104 4 0

BY MASONs.

WESTERN DEPARTMENT.

	L.15 0 10½
Building, slapping, cutting, and boring walls, roofs, doors, ventilators, &c.	Do. do. Altering and repairing hot air flues, cold screens, steam boilers, furnaces, grates, chimneys, and cans,
Jointing, lifting, and relaying pavement, &c.,	Hewing stones, altering, lifting, and clearing drains, cesspools, and gratings, also lifting and relaying causeway,
Lime, tiles, bricks, fire-clay, &c.,	<hr style="width: 100px; margin-left: auto; margin-right: 0;"/>
	57 17 0½

EASTERN DEPARTMENT.

	L.4 10 0
Building, slapping, cutting, and boring walls, roofs, &c.,	Do. do. Hot air flues, furnaces, grates, chimneys, &c.,
Jointing, lifting, and relaying payment, &c.,	Hewing stones, lifting and relaying drains, cesspools, &c.,
Amount of work for cottage,	<hr style="width: 100px; margin-left: auto; margin-right: 0;"/>
	12 19 9½
	<hr style="width: 100px; margin-left: auto; margin-right: 0;"/>
Carry forward,	£776 17 3½

Brought forward, £776 17 3½

BY BLACKSMITHS.

WESTERN DEPARTMENT.

Making a new stove for the laundry, . . .	L.8 15 0
Do. Altering and repairing boilers, furnaces, flues, hot air plates, steam-pipes, gratings, &c.,	18 1 6
Do. Meat hoist, baths, cistern, pump, mangle, bolts, wringing machine, &c., . . .	16 9 3
Do. Coal bunkers, beds, hurley, goblets, pans, &c.,	14 17 4
Do. Locks, keys, chains, &c.,	11 13 3
Do. Grates, Italian iron bolts, smoothing irons, iron stands, coal scuttles, and curling stones,	8 19 8
	78 16 0

EASTERN DEPARTMENT.

Making, altering, and repairing hot air stove, plates, dampers, ventilators, steam-pots, goblets, bells, &c.,	L.7 11 8
Do. Fenders, fire guards, fire irons, grates, gratings, scuttles, &c.,	3 8 4
Do. Locks, keys, chains, hinges, bolts, &c.,	5 12 4
Amount of work for cottage,	5 7 3
Do. do. masons,	1 2 8
Do. do. carpenters,	2 1 10
Do. do. gardeners,	8 10 7
Do. do. Myreside,	3 17 6
Do. do. plumber, 14s. 10d., and printer, 3s.,	0 17 10
Do. do. Tipperlin property, . . .	4 10 0
	43 0 0

BY UPHOLSTERERS.

WESTERN DEPARTMENT.

New Work.

Making 30 sea-weed mattresses, at 8s. 6d. each,	L.12 15 0
Do. 70 straw palliasses, „ 4s. 6d. do.	15 15 0
Do. 30 sea-weed pillows, „ 2s. 6d. do.	3 15 0
Do. 10 hair do. „ 4s. 6d. do.	2 5 0
Do. 6 hair-bottoms to chairs, 4s. 8d. do.	1 8 0
Do. 3 frames for a padded room, . . .	0 17 6
Do. 60 canvass frames, at 5s. 0d. each,	15 0 0
Do. 8 cushions, „ 1s. 0d. do.	0 8 0
Covering two forms with India-rubber cloth, .	0 15 0
Do. a fire-screen, with red durant, .	0 10 0
Making new strapping, 29s., twine, 6s.	1 15 0
	55 3 6

Carry forward, £953 16 9½

Brought forward, £953 16 9½

BY UPHOLSTERERS—Continued.

Repairs.

Stuffing, twilting, and repairing 130 sea-weed mattresses,	. . . . .	L.27	1	8
Do. 89 straw-palliasses,	. . . . .	7	6	9
Do. 1 hair mattress,	. . . . .	0	4	6
Do. 182 sea-weed pillows,	. . . . .	4	19	0
Do. 2 hair do.,	. . . . .	0	4	3
Do. 4 hair-cloth chair bottoms,	. . . . .	0	12	0
Repairing 37 canvass frames,	. . . . .	1	10	11
Do. 4 cushions and 1 fire-screen,	. . . . .	0	6	3
Do. Strapping and door-mat,	. . . . .	1	3	7
				43 8 11

EASTERN DEPARTMENT.

New Work.

Making 2 hair mattresses, at 25s. 6d. each,	. . . . .	L.2	11	0
Do. 9 sea-weed do. „ 8s. 6d. do.	. . . . .	3	16	6
Do. 17 straw-palliasses, „ 4s. 6d. do.	. . . . .	3	16	6
Do. 5 feather pillows, „ 5s. 0d. do.	. . . . .	1	5	0
Do. 6 hair do. „ 4s. 6d. do.	. . . . .	1	7	0
Do. 15 sea-weed do. „ 2s. 6d. do.	. . . . .	1	17	6
Do. 8 hair-cloth bottoms to chairs, at 4s. 8d. each,	1	17	4	
Do. 3 do. do. forms, „ 13s. 6d. do.	2	0	6	
Do. 2 covers for sofas, „ 17s. 6d. do.	1	15	0	
Do. 4 canvass frames, „ 5s. 0d. do.	1	0	0	
Do. 28 cushions, „ 1s. 0d. do.	1	8	0	
Do. Strapping	1	1	8	
				23 16 0

Repairs.

Stuffing, twilting, and repairing, 20 hair mattresses,	5	19	8	
Do. do. do. 10 sea-weed do.	1	16	4	
Do. do. do. 13 straw palliasses,	1	4	8	
Do. do. do. 33 pillows,	1	0	0	
Do. do. do. 6 cushions,	0	3	0	
Repairing 2 sofas, 8s. 4d., 4 carpets, 7s. 6d.,	0	15	10	
Do. strapping 2s. 6d., harness, 8s.	0	10	6	
Do. mats, 3s. 2d., stool, 4d.	0	3	6	
Amount of work for private individuals and attendants,	1	16	8	
				13 10 2

BY PLASTERERS, GLAZIERS, &c.

WESTERN DEPARTMENT.

Amount of account for glazier work,	L.30	1	6	
Do. do. plaster and slater's do.	16	0	5½	
				46 1 11½

EASTERN DEPARTMENT.

Amount of account for glazier work,	16	3	4	
Do. do. plasterer and slaters' do.	6	5	8	
				22 9 0
Carry forward,	£1103	2	10	

Brought forward,	£1103	2	10
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BY PLUMBERS, &c.

WESTERN DEPARTMENT.

Plumber Work.

Fitting up, altering and repairing water-closets, water, steam, and waste-pipes, cisterns, hot-air do., rhoinds, ridges, baths (shower and douche), pumps, sinks, urinals, boilers, wash-hand and cast- iron basons, valves, roofs, chains, plugs, cocks, cesspools, &c.,	L.39	3	8
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Gas Fitter's Work.

Fitting up, altering and repairing lustres, lamps, pendants, brackets, pipes, couplings, galleries, burners, glass globes, shades, &c.,	10	18	5½
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Tin-Smith's Work.

Making sponge-bath, milk-pitchers, attendants' meat dishes, coffee flagons, and other tins, and repairing and altering sundry others,	12	16	1½
			62 18 3

EASTERN DEPARTMENT.

Plumber Work.

Fitting up, altering, and repairing water-closets, bath, cesspools, boilers, pipes, waste do., rhoinds, roofs, new basons, chains, cocks, &c.,	L.7	1	1½
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Gas Fitter's Work.

Fitting up, altering and repairing lustres, lamps, brackets, pipes, couplings, burners, glass globes, &c.,	3	16	6
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Tinsmith's Work.

Making milk basin, pan for oven, and other tins, and repairing sundry do.,	2	7	10½
Amount of work for cottage,	3	16	7½
			17 2 1½

BY CARPENTERS

WESTERN DEPARTMENT.

Making, altering, and repairing water-closets, baths, rooms, floors, &c.,	L.21	11	6
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Do. Windows window shutters, window ropes, window-blinds, and cords, doors, ceilings, roofs, linings, rhoinds, shelving, planks, and boards,	21	13	1
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Do. Chests, boxes for patients' clothes, cess- pool, wardrobe, drawers, and trays,	21	6	7
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Do. Cabinet, tables, toilet do., and wash-hand stands,	21	8	8
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Carry forward,	£85	19	10	£1183	3	2½
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Brought forward, £85 19 10 £1183 3 2½
 BY CARPENTERS—Continued.

Making, altering, and repairing chairs, forms, stools, frames, locks, hinges, beds, stretchers, clothes-barrows, steps, and ladders, .	21	6	5
Do. Broom-handles, stove pattern, dressing- glasses, desks, hurley, mangle, washing-tubs, poles, music-stands, screens, clothes-pins, cricket bats, bird cages, piano, hand mell, coal bunker, rat trap, soldering bolt and chisel handles, saws, bench screw, sharpening stones, planes, castors, .	20	10	3
Do. Cart shed, gates and paling, .	22	1	0
	149	17	6

EASTERN DEPARTMENT.

Making, altering, and repairing water-closets, bath-rooms, floors, linings, doors, planks, boards, shelving, paling, locks, and hinges,	13	2	7
Do. Windows, window shutters, window ropes, window blinds, rollers, cords, tables, beds, stretchers, forms, broom handles, drawers, knife trays, bookcase, and frames, . . .	13	16	8½
Do. Chests, boxes, wash-hand stand, chairs, dressing-glasses, and sundry jobbing, . . .	9	10	0
Amount of work for cottage,	10	11	7
Do. do. coffins,	33	6	6
Do. do. gardeners,	22	4	8
Do. do. masons, 4s 6d., plasterers, 4d.	0	4	10
Do. do. smiths, 10s. 8d. printers, 10s. 9d.	1	1	5
Do. do. plumbers,	0	11	10
Do. do. Myreside,	12	18	10
	—	—	—
	117	8	11½

BY PAINTERS.

Deduct the amount of materials used for the above,

£	1632	8	5
	825	12	3 $\frac{3}{4}$
£	806	16	1 $\frac{1}{4}$

ARTICLES MADE BY FEMALES IN WESTERN DEPARTMENT.

REPAIRED.

	<i>L.</i>	<i>s.</i>	<i>d.</i>		<i>L.</i>	<i>s.</i>	<i>d.</i>	
726 Sheets, . . at	1d.	3	0	6	Brought forward,	92	5	9
2771 Men's shirts, , "	1d.	11	1	11	521 Pillow cases, . at	1d.	2	3
767 Women's shifts,	2d.	6	7	10	231 Aprons, . . .	1d.	0	19
658 Gowns, . . , "	2d.	5	1	4	25 Pairs of drawers,	2d.	0	4
643 Petticoats, . , "	2d.	5	7	2	227 Flannel shirts, .	2d.	1	17
335 Caps, . . , "	1d.	1	7	11	39 Bed covers, . .	2d.	0	6
483 Aprons, . . , "	1d.	2	0	3	2 Sofa covers, . .	2d.	0	0
264 Pairs blankets, , "	2d.	2	4	0	8 Bonnets, . . .	2d.	0	1
6208 Pairs stockings,	2d.	51	14	8	3 Curtains, . . .	2d.	0	0
481 Night gowns, , "	2d.	4	0	2	43 Pairs Stays, . .	2d.	0	7
	<hr/>				<hr/>			
	<i>L.</i>	<i>92</i>	<i>5</i>	<i>9</i>		<i>L.</i>	<i>98</i>	<i>6</i>

ARTICLES MADE BY FEMALES IN EASTERN DEPARTMENT.

61 Pillow cases.	2 Perforated card do.
58 Sheets.	13 Watch Pockets.
13 Collars.	7 Gowns.
12 Shifts.	24 Quilts, hemmed.
16 Petticoats.	28 Toilet covers.
6 Pin covers.	2 Pairs Worked cuffs.
7 Pairs of stockings, knitted.	2 Polkas.
6 Flannel underdresses.	10 Frills.
18 Neckerchiefs.	6½ Yards of trimming.
34 Pocket handkerchiefs.	6 Pairs of drawers.
10 Slip bodice.	4 Net caps.
48 Towels.	18 Night caps.
15 Worked collars.	16 Habit shirts.
70 Bread baskets.	4 Pairs garters.
40 Book-markers.	16 Tray cloths.
1 Lace chemisette.	1 Velvet cape.
6 Crochet purses.	2 Do. caps.
18 Needle books.	28 Aprons.
12 Pincushions.	11 Fine do.
6 Bead match boxes.	

REPAIRED.

36 Blankets.	8 Sofa covers.
97 Quilts.	28 Chair covers.
31 Underdresses.	4 Cushion covers.
57 Gowns.	27 Night caps.
19 Table cloths.	389 Shirts.
51 Pillow Cases.	38 Petticoats.
192 Sheets.	62 Shifts.
38 Collars.	42 Aprons.
1672 Pairs stockings.	

VALUE OF STOCK ON HAND, 31ST DECEMBER, 1855.

Provisions, &c.,	L.67	1	8
Blankets, plaiding, bed covers, hair and sea-weed mattresses, pillows, and palliasses,	248	18	0 $\frac{1}{2}$
Men's made clothes, viz. Jackets, vests, trowsers, braces, bonnets, caps, stocks, shoes, and leather, . . . , . . .	134	4	2
Stockings, and socks, ,	25	19	6
Prints, checks, Derry, white and black linen, white, black, and grey cotton, &c.,	57	16	8 $\frac{1}{4}$
Dowlas, canvass, packsheet, sheeting, towelling, bed-tick and Hessian,	61	4	2 $\frac{1}{2}$
Tapes, pirns, fingering and wheeling worsted, and small wares,	61	14	11
Spoons, combs, dressing glasses, gutta-percha and tin goods and mats,	32	14	7 $\frac{1}{4}$
Flannel, tartan shawls, and handkerchiefs,	33	15	2 $\frac{1}{2}$
Tweeds, blue and black cloth,	177	7	2 $\frac{1}{4}$
Made up linen, shirting, shirts, and women's clothing, . . .	58	13	7 $\frac{3}{4}$
Flannel shirts and drawers,	29	19	9
Crockery, crystal, brushes, and sundry furnishings, . . .	80	12	8 $\frac{1}{2}$
Wood, paint, lead, iron, window-glass, gas-fittings, ironmongery, &c. &c.,	190	18	6 $\frac{1}{2}$
Pigs, valued at	95	6	0
	L.1356	6	10

A P P E N D I X.

PATHOLOGICAL APPEARANCES OBSERVED IN THE BRAIN DURING THE YEAR 1855.

Of the 62 deaths which occurred during the year, post mortem examinations were made in 57 cases ; in all of these, the Encephalon was carefully examined, and in many of them the Spinal Cord was also made the subject of investigation.

The following abstract will shew the more marked lesions in connection with the forms of Insanity in which they were observed.

The forms of Insanity at the time of death in those examined were as follows :—

Acute Mania, 4 cases ; Dementia, 32 ; Dementia with Epilepsy, 3 ; Melancholia, 9 ; Monomania, 4 ; General Paralysis, 5.

Calvarium was of unusual Thickness in 10 cases ; 1 of Acute Mania, 6 of Dementia, 2 of Dementia with Epilepsy, and 1 of Monomania.

Calvarium was thinner than usual in 8 cases ; 1 of Melancholia, 4 of Dementia, 2 of Monomania, and 1 of Acute Mania.

Abnormal Adhesion of Dura Mater to Calvarium existed in 7 cases ; 5 of Dementia, 1 of Dementia with Epilepsy, and 1 of Acute Mania.

Increased Thickness of Dura Mater was found in 3 cases ; 1 of Dementia, and 2 of Dementia with Epilepsy.

Ossific Deposit in Falx Cerebri existed in 1 case of Dementia.

Abnormal Adhesion of Arachnoid to Dura Mater was found in 1 case of General Paralysis.

There was a remarkable development of the *Glandulæ Pacchioni* in 1 case of Acute Mania.

Serous Effusion into Sac of Arachnoid and into Meshes of Pia Mater existed in 36 cases ; 21 of Dementia, 1 of Dementia with Epilepsy, 3 of Monomania, 4 of General Paralysis, 4 of Melancholia, and 3 of Acute Mania.

Extravasation of blood into Sac of Arachnoid was found in 1 case of Melancholia.

Organised Lymph in Sac of Arachnoid was found in 1 case of General Paralysis. (a)

Opacity and Thickening of Arachnoid was found in 35 cases ; 3

of Acute Mania, 19 of Dementia, 3 of Dementia with Epilepsy, 4 of Melancholia, 2 of Monomania, and 4 of General Paralysis.

Granular Deposit in Arachnoid over general surface was noticed in 1 case of General Paralysis.

Cartilaginous Scales on the Arachnoid were found in 1 case of Dementia.

Congestion of Membranes was noticed in 11 cases; 2 of Acute Mania, 3 of Dementia, 5 of Melancholia, and 1 of Monomania.

Effusion of Blood under the Arachnoid occurred in 2 cases; 1 of Dementia, and 1 of Monomania.

A Deposit of Lymph beneath the Arachnoid was found in 1 case of Dementia.

Adhesion of Membranes to Cortical Substance was found in 3 cases of General Paralysis, and 1 of Dementia.

Tubercles in the Membranes existed in 3 cases; 2 of Dementia, and 1 of Dementia with Epilepsy.

Ossification and AEtheroma of the Arteries of the Brain existed in 7 cases; 6 of Dementia, and 1 of Monomania.

Many of the Arteries of the Brain were obstructed by firm white coagula in 1 case of Dementia.

Paleness of the Grey Matter was noticed in 3 cases of Dementia.

Grey Matter was of a dark tint in 4 cases; 1 of Dementia, 1 of Melancholia, and 2 of Acute Mania.

Grey Matter had a Violaceous tinge in 5 cases; 1 of Melancholia, 2 of Dementia, and 2 of General Paralysis.

Grey Matter had a yellow tint in 4 cases; 1 of Melancholia, 1 of General Paralysis, and 2 of Dementia with Epilepsy.

Grey Matter was softened in 1 case of Dementia.

Grey Matter presented limited yellow softening in 2 cases of Dementia.

White Matter had a curdy appearance in 1 case of General Paralysis.

An Abscess in the anterior and inferior portion of the middle lobe of the right Cerebral hemisphere of the Brain was found in 1 case of Melancholia. (b)

Punctæ Vasculosæ were very numerous in 18 cases; 7 of Dementia, 2 of Dementia with Epilepsy, 3 of Melancholia, 2 of Monomania, 2 of General Paralysis, and 2 of Acute Mania.

Apoplectic Effusion was found in 41 cases of Monomania, and 3 of Dementia.

*Serous Effusion into Lateral Ventricle*s was found in 25 cases; 2 of Acute Mania, 2 of Melancholia, 15 of Dementia, 1 of Monomania, and 5 of General Paralysis.

*Lymph in the Lateral Ventricle*s occurred in 1 case of Dementia.

*Granular condition of Lining in Membrane of Lateral Ventricle*s

was found in 11 cases ; 3 of Dementia, 4 of General Paralysis, 1 of Monomania, and 3 of Acute Mania.

*Partial adhesion of the Walls of the Lateral Ventricle*s was observed in 1 case of General Paralysis.

Apoplectic Cicatrices were found in 2 cases of Dementia.

The Dura Mater of the Spinal Cord was remarkably thickened in 1 case of Dementia, in which caries of the vertebræ existed. (c)

Marked Thickening of the Spinal Arachnoid was observed in 1 case of Dementia (c)

Cartilaginous, or Ossific Laminæ, on the Arachnoid of the Spinal Cord were noticed in 10 cases ; 3 of Dementia, 1 of Dementia with Epilepsy, 1 of General Paralysis, 3 of Melancholia, and 2 of Monomania. (d)

A Deposit of Lymph was found beneath the Spinal Arachnoid in 1 case of Dementia with Epilepsy. (e)

(a) The case in which organised lymph was found in the sac of the arachnoid, was somewhat remarkable.

HISTORY.—A. B., a reader for the press, of sober and industrious habits, fell into general bad health from over attention to business. About a year previous to admission into the Asylum, he lost his speech, and the power of his left side, for the space of a quarter of an hour. Previous to this, no mental derangement was observed. After the first seizure, similar attacks occurred about every three weeks, but gradually diminished in their duration ; and at the time of admission, they only lasted two or three minutes. His memory became gradually impaired, his speech faltered, and his gait was affected. Those delusions so characteristic of General Paralysis, took possession of his mind about four months before coming to the Asylum. During his residence in the Asylum, he became gradually fatuous, and General Paralysis became more complete. He died, after having been in the house seven months. During the last four days of his life, he lay in a semi-comatose state, with the flexor muscles of his hand and arms permanently contracted, and his jaws firmly locked.

POST-MORTEM.—On examination after death, a thick false membrane was found beneath the dura mater on the left side ; it completely covered the hemisphere, with the exception of the base. The membrane was nearly twice the thickness of the dura mater, of firm consistence, and apparently well organised ; over its surface there were many dark patches, which appeared to be old clots of blood.

A false membrane was also found on the right side ; but it was thin and delicate, and was limited to the upper surface of the hemisphere.

There were about two ounces of fluid beneath the arachnoid, and one ounce in the lateral ventricles. There was also a glanular con-

dition of the lining membrane of the ventricles. The nervous substance of the brain did not present any abnormal appearance.

REMARKS.—The points of interest in this case are, How was this false membrane formed? and, When was it formed? In answer to the first of these questions, there can be little doubt that it was the result of extravasation of blood. At first sight, it may appear more uncertain when this haemorrhage took place. It will be observed, that the first apoplectic seizure was of short duration, and that the hemiplegic symptoms were only of temporary duration. We know that a similar lesion is not unfrequent in new-born children, as a result of pressure on the head. In those cases, the paralytic symptoms are also temporary. The fact is explained by the pressure being uniformly spread over the surface of the brain, and not confined to one point, as in haemorrhage into the brain itself.

A similar lesion was noticed in the Appendix to last year's Report.

HISTORY.—J. S. was a tailor, of sober and industrious habits. Ten years previous to admission, he had a seizure somewhat like an apoplectic fit. Soon after this he was obliged to give up work, on account of impairment of vision. His friends observed, also, that his temper was much altered from this date; he became irritable and discontented. About a month previous to admission, he had another seizure, after which his mind was greatly affected; he displayed the characteristic symptoms of exaltation, and was violent and abusive to his family. During his residence in the Asylum, he had many congestive attacks. He became generally paralysed, and was completely amaurotic.

A year after admission, or eleven after the invasion of the malady, he died in a condition similar to that of the last case.

POST MORTEM.—A false membrane was found to extend over the entire superior aspect of the Cerebrum. The arachnoid had a granular appearance. There was very little fluid in the sac, pia mater, or ventricles. The spinal canal contained about five ounces of fluid. The spinal cord appeared unusually soft; and about the middle of the dorsal region, there was a portion of the nervous matter of a yellowish red colour, and softer even than the rest of the cord. In this, as in the former case, there was no apoplectic seizure, or well marked paralytic symptoms, to indicate the existence of any extensive haemorrhage; the reason is undoubtedly the same—its occurring in the sac of the arachnoid, and spreading over the entire upper surface of the Cerebrum.*

(b) A case of Melancholia, in which there was an abscess in the brain, was remarkable, in so far as there was no symptoms during

* Twelve similar cases are given by Bayle in his *Traité des Maladies du Cerveau et de ses Membranes*, page 250.

life to lead to the supposition of such a lesion existing. J. C., a woman who had laboured for three years under the most pitiable melancholy. During that time, her bodily health was very bad ; she had constant cough ; frequent diarrhœa. She died a victim to a complication of tubercular affections. The right lung was completely disorganised by tubercle, and universally adherent to the costal pleura. The left lung was not less diseased, but was compressed by copious pleural effusion. The abdomen displayed the remains of extensive tubercular peritonitis. On the anterior and inferior surface of the middle lobe of the right Cerebral hemisphere, there was a soft point, exuding a glary purulent fluid ; on making a section, a cavity was found capable of containing a filbert. The abscess involved both the grey and white nervous substance. There was a thin coating of coagulated blood on the inner surface of the dura mater on the right side. The vessels of the pia mater were much injected. The dura mater, arachnoid, and pia mater of left side, were, to all appearance, normal.

(c) In one of the cases of Tubercular Meningitis, the subject, G. D., a demented patient, had a distinct apoplectic seizure fifteen days before death ; this was followed by well marked hemiplegia of the right side, especially of the arm and face. He continued hemiplegic up to the time of death, and died comatose.

Tubercles were found in great numbers in the meninges ; the arachnoid was opaque and thickened ; and on the lateral aspect of each hemisphere of the Cerebrum, there was a copious deposit of lymph beneath the membrane. There was also lymph deposited under the arachnoid of the Cerebellum. The spinal arachnoid was opaque and thickened, and lymph was found beneath it. Nothing abnormal was detected in any part of the nervous matter of the brain or spinal cord, beyond its unusual vascularity. Each of the lateral ventricles contained about half an ounce of turbid serum.

In this case there was a distinct apoplectic seizure, but no corresponding lesion. The lymph under the arachnoid was evidently of old standing, and connected with Chronic Tubercular Meningitis ; and unless it be the serum in the ventricles, which was not in greater quantity than might have been anticipated in a protracted case of Dementia, there was no apparent lesion of recent origin.

(d) SCALES ON SPINAL ARACHNOID.—It will be observed, that in ten cases cartilaginous or ossific laminæ were detected beneath the arachnoid of the spinal cord. In all the cases, they were situated on the posterior aspect of the cord ; they resembled small spiculæ or scales, and were of a milky opacity ; externally they were flat and smooth, while their internal aspect presented nodular projections, somewhat like minute pieces of coral. In each instance, a micro-

scopic examination shewed them to consist of cartilage ; and in some they were being converted into bone. The smoothness of the external surface, and the irregularity of the internal, would seem to indicate that they increase from without inwards.

The pathological value of these bodies has yet to be determined, as in none of the cases did they appear to have any connection with symptoms observed during life. In three cases of General Paralysis, the spinal cord was examined, and in only one of these were the cartilaginous scales found ; while out of four cases of Dementia, in which no spinal or paralytic affection existed, three presented these bodies. Of three cases of Monomania, they were present in two, as also in three cases of Melancholia, and one of Dementia with Epilepsy.

An idea of the frequency of their occurrence may be formed from the fact, that, of fourteen cases, in which the spinal cord was examined, they were found in ten.

In one instance, bodies exactly resembling those found in the spinal arachnoid were observed in the cerebral arachnoid ; they were situated over the anterior, superior, and inner part of each cerebral hemisphere. The case was one of Dementia, following an ordinary attack of Acute Mania. The patient had been insane for fifteen years, and presented no remarkable symptom.

(e) In a demented epileptic, W. B., who died from Phthisis, the following lesions were found in the brain and spinal cord. Numerous tubercles in the meninges, some of them encroaching on the cortical substance. Caries was found to affect the sixth cervical and the three lower dorsal vertebræ ; the latter were surrounded by a bag, about the size of an orange, projecting into the posterior medias-tinum, and containing thick pus. In neither situation did the caries extend to the portion of the vertebræ forming the spinal canal. On laying open the spinal dura mater, which was normal, the arachnoid was found opaque, and much thickened. Beneath the arachnoid there was considerable serous effusion, and an abundant deposit of lymph. The opacity and thickening of the arachnoid extended up to, and over, the medulla oblongata. At the foramen magnum the arachnoid was adherent to the dura mater. There was general, but slight, opacity of the cerebral arachnoid, and a small amount of sub-arachnoid effusion.

The weights of the organs, and the specific gravity of the grey and white matter of the Cerebrum and Cerebellum, have been taken, and are given, as formerly, in a tabular shape.

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TABLE I.—MALES.—Weights of Organs and Specific Gravity of Cerebral Matter.

Age.	Form of Insanity.	Cause of Death.	Specific Gravity of						S stature. ft. in.	
			Cerebrum.	Cerebellum.	Grey.	White.	Grey.	White.		
26	Acute Mania,.....	Tobacco Poison,.....	49	7	9	14	16	53½	4½	1044
26	Dementia c. Epilepsy,.....	Tuberculosis,.....	44	..	8	30	17	43	5½	1034
27	Dementia,.....	Phthisis,.....	53	6½	21	43	56	52½	5	1038
28	Melancholia,.....	Phthisis,.....	53½	6¼	34½	51	57	52½	5	1036
32	General Paralysis,.....	General Paralysis,.....	44	6	10	18	56	52½	6½	1040
33	Dementia,.....	Char. Tuber. Meningitis,.....	51	6½	9½	25	19½	42½	6½	1040
36	Melancholia,.....	Phthisis,.....	56½	7	8½	30½	58½	53	5½	1033
36	Dementia c. Epilepsy,.....	Dropsy,.....	54½	6½	8½	22	19	42½	6	1043
37	General Paralysis,.....	General Paralysis,.....	46	6½	13½	20	29½	51	4½	1040
38	General Paralysis,.....	General Paralysis,.....	49	6½	9	24½	17	47½	6	1044
39	General Paralysis,.....	General Paralysis,.....	55½	7½	8½	30	15	53	5	1035
39	General Paralysis,.....	General Paralysis,.....	46	6	8	26½	16½	44½	6½	1037
40	Mono. of Suspicion,.....	Exhaustion,.....	53	6½	11	18½	20½	56	6½	1037
44	Dementia,.....	Exh. from Supp. of Knee,.....	60½	7½	9½	16	6	49½	6½	1041
49	Dementia,.....	Gangrene of Feet,.....	49½	6½	15½	34½	29½	35½	3½	1048
50	Dementia c. Epilepsy,.....	Epilepsy,.....	50	6	15½	35	35	4½	5½	1041
52	Acute Mania,.....	Morbis Cordis,.....	50	6½	13	23½	20½	48½	5½	1030
52	Dementia,.....	Morbis Cordis,.....	46	6½	16½	38½	43½	59	6½	1037
54	Dementia,.....	Phthisis,.....	50½	6	10½	38½	24½	48½	4½	1035
62	Melancholia,.....	Dysentery,.....	46	6½	9½	10	10½	38½	4½	1041
66	Mono. of Suspicion,.....	Perit. from Perforation,.....	50½	6	7½	30	19½	43½	3½	1042
77	Senile Dementia,.....	Exhaustion,.....	52½	6½	7½	22½	11	31	2½	1041
78	Senile Dementia,.....	Morbis Cordis,.....	52½	7	13½	28	58½	3	1031	1039

TABLE II.—FEMALES.—Weights of Organs, and Specific Gravity of Cerebral Matter.

Age.	Form of Insanity.	Cause of Death.	Specific Gravity of			Structure.	
			Cerebrum.	Cerebellum.	White.		
21	Dementia,	Phthisis,.....	44½	20½	... 13½	1034	1035
30	Dementia,	Phthisis,.....	39½	26	54½	1045	1032
30	Dementia,	Phthisis,.....	43	19	33	1043	1046
31	Dementia,	Diarrhoea,.....	49½	17	42	1044	1046
35	Dementia,	Phthisis,.....	40	24½	41	1044	1042
35	Dementia,	Phthisis,.....	47	27	36	1044	1045
36	Dementia,	Phthisis,.....	42	25½	45½	1042	1040
36	Dementia,	Tuberculosis,.....	43½	35½	23	1036	1046
38	Melancholia,.....	Phthisis,.....	44	38½	59	1038	1041
40	Dementia,	Diarrhoea,.....	47½	6	22	1039	1048
40	Melancholia,.....	Phthisis,.....	42½	6	19½	1042	1047
40	Acute Mania,.....	Bright's Disease,.....	50½	13	16½	1041	1042
46	Dementia,.....	Hanging,.....	50½	10	20	1046	1046
46	Mono. of Suspicion,.....	Pneumonia,.....	41½	5½	13½	1043	1043
47	Mono. of Suspicion,.....	Erysipelas,.....	46	6½	32	1045	1040
47	Dementia,.....	Phthisis,.....	47	6	16½	1045	1046
48	Dementia,.....	Gangrene of Lung,.....	41	6½	7½	1042	1042
50	Melancholia,.....	Phthisis,.....	49	6½	25½	1043	1043
50	Dementia,.....	Pneumonia,.....	42½	6½	30	1045	1046
50	Dementia,.....	Apoplexy,.....	44½	5½	12	1046	1048
52	Melancholia,.....	Phthisis,.....	42½	5½	20	1044	1044
55	Dementia,.....	Pneumonia,.....	46	5½	13	1046	1046
55	Melancholia,.....	Gangrene of Lung,.....	43	5½	22	1045	1046
56	Acute Mania,.....	Pneumonia,.....	41½	5½	19	1042	1042
57	Melancholia,.....	Apoplexy,.....	46	5½	12	1044	1044
57	Dementia,.....	Phthisis,.....	42½	4½	36	1045	1045
57	Melancholia,.....	Pneumonia,.....	43	5½	24	1046	1046
59	Melancholia,.....	Tuberculosis,.....	41½	5½	13	1047	1047
60	Melancholia,.....	Carcinoma,.....	50	5½	8	1042	1042
61	Dementia,.....	Dysentery,.....	45½	6	9½	1037	1045
62	Dementia,.....	Exhaustion,.....	45½	5½	13	1037	1042
	Bright's Disease,.....	Apoplexy,.....	43	6	9½	1042	1044
	Tuberculosis,.....	Tuberculosis,.....	45½	5½	13	1037	1044
	Bright's Disease,.....	Bright's Disease,.....	45½	5½	13	1037	1044